

**EAR, NOSE & THROAT SPECIALISTS
OF SOUTHERN NEW HAMPSHIRE, P.A.**
30 Canton Street, #2
Manchester, NH 03103
(603) 622-3623

**James P. Bartels, MD
Jeffrey Zimmerman, MD
Andrew R. Spector, MD
John B. Stallman, PA-C**

Surgical Instructions – UPPP with or w/o Tonsillectomy

Definition:

The term Uvulopalatopharyngoplasty (UPPP) is the surgical removal of the uvula, part of the soft palate and often the tonsils. The purpose of the UPPP is for the surgical treatment of mild to severe obstructive sleep apnea. The surgery is performed at the hospital while the patient is under general anesthesia. Your surgeon will determine whether you will go home on the day of surgery or stay in the hospital for 23 hours.

Pre-Operative Instructions:

- Fill your antibiotic and pain medication prescriptions 24 hours before surgery.
- Read and follow all directions on your Pre-Operative Surgical instruction sheet .

Common Post-Operative Complaints:

- Moderate to severe sore throat for 7—14 days
- Occasional episode of vomiting
- Low-grade, fluctuating fever of 100°—101° degrees orally
- Saliva may feel thicker / “lump in the throat” feeling / bad breath
- General fatigue, even several days after the procedure
- Referred ear pain may begin approximately 5 days after surgery
- Sutures in mouth may take up to 6 weeks to dissolve

Continued on back →

Common Post-Operative complaints continued...

- Possible fluid regurgitation—slippage of thin fluids, like water, over the palate into the nasal passage is possible during swallowing
- Hypernasal speech (voice sounds funny) as increased air flow passes into nasal passage due to a lack of palate flexibility

Post-Operative Instructions:

- Maintain pain control with prescribed medications. For additional pain relief, use 3 tablets (crush them) of 200 mg Motrin or Advil—use every 6 hours as a supplement. If you were prescribed the pain medication, Roxicet, remember that it cannot be refilled by phone—please call the office and plan to have someone pick up a written prescription before the weekend.
- Drink at least 2½ quarts of fluid per day.** On the first day drink clear fluids such as water, apple juice, popsicles, sherbert, Gatorade or broth. On the 2nd to 3rd day, increase to “full” fluids such as Ensure, Boost, frappes or milk shakes. As you are able, move on to a soft, solid diet.
- You must maintain quiet activities and avoid activities that increase the heart rate such as aerobics or jogging.
- You must remain out of work for 10—14 days.
- Avoid vigorous clearing of throat secretions.

Call the office at 622-3623 if the following occurs:

- Nausea or vomiting
- Bleeding: For a small tonsil bleed, which is fresh blood found in predominately clear saliva, gargle for 10 minutes (by the clock) with a mixture of half hydrogen peroxide and half ice water. Wait 20 minutes. Call the office if the problem persists.

For active, profuse bleeding, especially at night or on the weekend, call immediately or go to the Emergency Room.
- Inability to urinate
- Medication problems such as a rash, itchiness, nausea, vomiting or unrelenting pain